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Revocation and recidivism after high-security forensic treatment in French-speaking Belgium: social, clinical, judicial, and trajectory factors

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ABSTRACT

Forensic patients discharged from high-security psychiatric hospitals require careful management during community reintegration. Post-release trajectories remain insufficiently explored in French-speaking Belgium. This retrospective longitudinal study examined revocation and recidivism among 168 individuals conditionally released between 2014 and 2018 from a high-security forensic psychiatric hospital in Wallonia. Outcomes were classified as conditional release maintained, unconditional release, or revocation. Revocation occurred in 18.5% of cases, within two years of discharge and more often in response to breaches of release conditions than to new offences. Although more than half of the patients committed at least one supervision breach, officially recorded recidivism remained low (3.0%). Compared with other groups, revoked individuals presented higher actuarial violence risk scores, more substance use disorders, more antisocial personality features, and greater number of breaches of conditional release. In contrast, individuals granted unconditional release were older, had lower violence risk scores, fewer antisocial personality features, fewer supervision breaches, and greater residential stability. Logistic regression analyses indicated that breaches of the no-reoffending condition, therapy non-adherence, and residence restriction violations were significant predictors of revocation, while more frequent supervision meetings were associated with lower odds of revocation. These findings support the interpretation of revocation as a preventive risk management mechanism within supervision framework.

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KEYWORDS High-security forensic psychiatric hospital; conditional release; revocation; criminal recidivism; violence risk assessment (VRAG-R); post-release supervision

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ORIGINAL ARTICLE

A Psychological Approach to the Life Trajectories of Women Who Committed Filicide

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Abstract

Purpose Filicide theories have evolved from Resnick's (1979) classification to more dynamic models that consider personal histories. Based on the idea that filicide stems from a complex interplay of stressful psychosocial events across life (Stroud, 2008), we propose another way to consider filicide focusing on psychological risk factors and mechanisms underlying the crime and their role in shaping life trajectories from birth until aggressive behavior against their child.

Method Sixteen women who committed or attempted to commit filicide were interviewed in prison using the grid developed by Eloir et al. (2019). Four dimensions of their lives were explored: health, the carceral environment, adverse events, and social and affective relationships. All these elements were organized along a timeline representing the life trajectory of the person.

Results Four types of trajectory were identified, highlighting riskier dimensions, namely the 1) continuous psychiatric dimension, 2) a temporary psychotic disorder at the time of the filicide, 3) continuous physical and psychological violence, and 4) a poor relational sphere.

Conclusion Our results support the theory that complex constellations of multiple psychosocial stresses are present in the lives of filicide perpetrators and demonstrate the importance of understanding the filicide from a dynamic point of view in relation to the individual's life trajectory.

Keywords Life trajectories · Mother · Filicide · Mental health

Introduction

In France, it is estimated that approximately 50 to 60 children under the age of 18 die each year as a result of intrafamilial homicide, with women representing around 70% of perpetrators. This figure is believed to be underestimated (French Ministry of Justice, 2018). To describe this phenomenon, we use the generic term "filicide" to refer to the killing of one's own child, including both infanticide and neonaticide, although some authors have suggested that these could be considered subcategories of filicide (Liem & Koenraadt, 2008; Myers et al., 2021).

Resnick (1969) was the first to propose a classification of filicide in the late 1960s, distinguishing five subtypes of filicide based on motivation: neonaticide, murder during episodes of delirium or suicidal ideation, murder following physical violence, desire to cause pain to a spouse, and murder of an unwanted child. Based on this typology and focusing on mothers, McKee (2006) described several factors that should be considered, including the mother's mental health and level of psychopathy, the context in which the child was born, and whether there was repeated violence against the child.

More recently, Sidebotham (2013) discussed the role of behavioral control in these aggressive behavior against their child. They contrasted extreme control, which can lead to manipulative behaviors (up to and including intentional homicide), with the lack or loss of control caused

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How Childhood Traumas and Dissociative Processes Influence Autobiographical Memory Among Forensic Inpatients with Antisocial Personality Disorder

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ABSTRACT

People with antisocial personality disorder (ASPD) exhibit specific characteristics in autobiographical memory processes, yet few studies have investigated how early traumatic experiences shape identity-related memories in this population, especially among those with or without psychopathic traits (ASPD ± P). The present study aims to examine the role of dissociation, psychopathy, and childhood trauma on the content and the structure of self-defining memories among 52 forensic psychiatric inpatients diagnosed with ASPD ± P. Multiple regression analyses showed that the recall of multiple memories was primarily associated with exposure to early traumatic experiences and low levels of dissociation. In contrast, the production of nonintegrative memories was predominantly predicted by dissociation and interpersonal–affective traits of psychopathy (Factor 1 of the PCL-R), which proved more influential than trauma exposure itself. The recall of life-threatening memories was facilitated by trauma exposure and low dissociation, indicating that these emotionally intense events remain readily accessible and narratable. Better understanding of these mechanisms among forensic patients with ASPD may guide targeted therapeutic interventions.

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KEYWORDS
Antisocial personality disorder; dissociation; self-defining memories; traumatic experiences

Understanding how individuals construct and organize memories of their personal past is essential to understanding identity formation, psychopathology, and behavior – an issue of particular clinical relevance among forensic populations such as individuals with antisocial personality disorder (ASPD). Personal experiences and life events are encoded in autobiographical memory (AM) (Conway & Pleydell-Pearce, 2000), a system responsible for organizing past experiences with personal significance. In the AM, some personal memories, called self-defining memories (SDMs), are selected and reinforced for their

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Chapitre 54

Agression sexuelle et émotions

L.-A. Tiberi, X. Saloppé, A. Vicenzutto, T.-H. Pham

Introduction

Depuis plusieurs décennies, nous assistons à une explosion de recherches dans le domaine de l'évaluation du risque de récidive violente et sexuelle, au moyen d'instruments d'évaluation du risque actuariel et dynamiques [1], de plus en plus utilisés sur le plan international [2]. Aucune échelle actuarielle de risque n'intègre de facteurs directement émotionnels. En revanche, les déficits du fonctionnement socioaffectif, comprenant les aspects affectifs et conatifs, sont l'un des quatre domaines dynamiques du risque de récidive sexuelle, avec les intérêts sexuels déviants, les cognitions et attitudes distordues et le contrôle de Soi [3]. Ainsi, deux échelles de Hanson, la *Stable* et l'*Aigu*, intègrent notamment comme facteurs dynamiques, dits « criminogènes », les « émotions négatives », l'« hostilité à l'égard des femmes » et l'identification émotive avec les enfants [4]. Ils sont plutôt prédicteurs de la récidive sexuelle alors que les facteurs dits « d'effondrement », incluant la perte d'espoir, les idées suicidaires, le sentiment d'injustice, sont davantage prédictifs de la récidive générale. Ces facteurs dynamiques émotionnels constituent donc des cibles thérapeutiques, sachant que le risque de récidive peut être majoré via l'entremise de potentiels facteurs médiateurs et/ou modérateurs tels que des traits de personnalité ou l'abus de substance.

Au-delà de l'évaluation des facteurs prédictifs, l'effort de compréhension et de théorisation de la récidive sexuelle ne peut se passer de l'appréciation de traits psychologiques ainsi que des facteurs situationnels prédisposant l'évaluation des comportements violents à travers les instruments d'évaluation du risque [5]. Ainsi, la compréhension des causes de la récidive ne peut faire l'économie des facteurs émotionnels. Enfin, ces facteurs font partie de la clinique intégrative incluant la motivation au changement ou la régulation émotionnelle.

Rôle des émotions dans l'agression sexuelle

Initialement considérées comme obscurcissant la raison, les émotions sont aujourd'hui reconnues comme une composante centrale et bénéfique du fonctionnement humain. Ce changement de paradigme a donné lieu à l'« essor de l'affectivisme » [6], défini comme l'intérêt des processus émotionnels et motivationnels pour prédire les comportements et les cognitions. Cet essor a permis de mieux comprendre les liens entre les affects et l'agression sexuelle dans le domaine carcéral et médicolégal [7]. Cet intérêt pour les émotions s'est principalement porté sur la colère, car elle contribue à l'émergence de l'hostilité qui

Violences
© 2026 Elsevier Masson SAS. Tous droits réservés, y compris ceux relatifs à la fouille de textes et de données, à l'entraînement de l'intelligence artificielle et aux technologies similaires.

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In M. Lacambre (Dir.), Violences : Évaluation, prise en charge et prévention (pp. 443–447). Masson Elsevier.

Le développement de la psychologie légale dans le contexte criminologique belge

Thierry H. PHAM

Résumé :

La psychologie légale en Belgique francophone fait face à plusieurs obstacles majeurs. Elle est confrontée à une tradition clinique dominée par la psychanalyse, centrée sur une théorie globale et indivisible, alors qu'elle repose sur une approche empirique et structurée. Le champ souffre également d'un manque de diffusion de la recherche et d'une forte instabilité du personnel en milieu carcéral. Pour y répondre, les outils d'évaluation structurée et la recherche scientifique constituent des leviers essentiels, malgré leur validation encore limitée localement. La formation se structure mais le secteur reste marqué par une pénurie d'experts. L'article interroge les défis futurs et notamment le développement de pratiques fondées sur les preuves, le travail en réseau et le renforcement de l'identité professionnelle.

Mots-clefs : Psychologie légale, Criminologie, Recherche, Évaluation structurée, Expérience.

Abstract:

Forensic psychology in French-speaking Belgium faces several major obstacles. It is confronted with a clinical tradition based on psychoanalysis, which centres on an all-encompassing and indivisible theory. In contrast, forensic psychology is grounded in an empirical and structured approach. The field also suffers from a lack of research dissemination and high staff turnover in correctional facilities. Despite their limited validation at the local level, structured assessment tools and scientific research are essential in addressing these challenges. Although training programmes are emerging, the sector continues to face a shortage of experts. This article looks at future challenges, focusing particularly on the development of evidence-based practices, networking and strengthening professional identity.

Keywords : Forensic psychology, Criminology, Research, Structured assessment, Experience.

Au sein de cet article, trois axes principaux seront abordés. Le premier concerne les obstacles à la mise en place de la psychologie légale dans le contexte belge francophone. Celle-ci concerne l'étude scientifique des comportements criminels dans les contextes judiciaires et médico-légaux. Le deuxième porte sur les initiatives proposées pour y répondre. Enfin, le troisième axe traite des défis futurs du champ.

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La criminologie n'est pas de la clinique

En Europe francophone, et en France en particulier, la psychologie clinique est fréquemment assimilée au courant psychanalytique. Ce postulat n'est pas nécessairement partagé dans les pays anglo-saxons, où l'approche dynamique et la recherche expérimentale ne sont pas antinomiques, comme en témoignent les travaux de Fonagy et Bateman (2006) ou, plus anciennement, ceux de Luborsky et de ses collègues (1985).

Thierry H. PHAM



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Congrès passés

8th International MBT Conference | 28-29 May 2026
TURBULENCE AND MENTALIZING: CHALLENGES AND OPPORTUNITIES

8e Conférence internationale en TBM | 28-29 mai 2026
TURBULENCE ET MENTALISATION : DÉFIS ET OPPORTUNITÉS



Ce poster a été présenté lors du congrès
« *Turbulence et mentalisation : défis et opportunités* » à Paris en mai 2026 :

WHY EXPERIENCE FAILS TO GENERATE MEANING : IMPAIRED AUTOBIOGRAPHICAL REFLECTIVE FUNCTIONING IN ANTISOCIAL PERSONALITY DISORDER

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INTRODUCTION

Antisocial Personality Disorder (ASPD)

→ persistent interpersonal disturbances, chronic violations of social norms, and maladaptive emotional and behavioural patterns that contribute to recidivism

The persistence of an antisocial trajectory may reflect ***difficulties in meaning-making based on past experiences.***

- Mentalization-based models identify impairments in reflective functioning as a core feature of ASPD
- Existing research relies largely on decontextualized social-cognitive tasks or self-report measures

Limited insight into how individuals with ASPD reflect on their own autobiographical experiences.

OBJECTIVES

This study examined **reflective functioning (RF)** as an operationalization of mentalization, using **life narratives** to investigate whether individuals with **ASPD** exhibit specific impairments compared with individuals with **Psychopathic Personality Disorder (PPD)** and **Forensic Controls (FC).**

METHODOLOGY

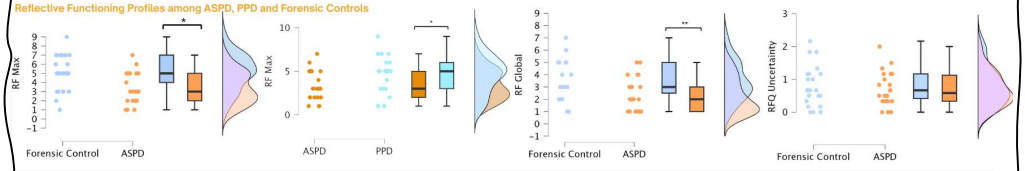
Forensic inpatients (N = 92) recounted their **personal life stories,** which were coded using the **RF Scale** (Fonagy et al., 1998) following the **RF rating procedure** developed by **Köber et al. (2019).**

ASPD (n = 31) vs PPD (n = 26) vs FC (n = 35)

- Global RF scores, maximum RF scores, and maximum thematic RF scores across key life domains were compared using *non-parametric analyses.*
- Maximum RF was indexed by the highest RF score across topical units within each narrative.
- Reflective Functioning Questionnaire (RFQ) uncertainty scores were included to assess participants' subjective perceptions of their mentalization ability.

RESULTS

Reflective Functioning Profiles among ASPD, PPD and Forensic Controls



Thematic Reflective Functioning Profiles among ASPD, PPD and Forensic Controls

	ASPD		PPD		FC			ASPD vs FC	PPD vs FC	ASPD vs PPD
RF Max scores	*n*	*M (SD)*	*n*	*M (SD)*	*n*	*M (SD)*	*Kruskal-Wallis H*		*Mann-Whitney U*	
Family situation	12	2.83(1.75)	17	4.53(1.70)	17	4.59(2.09)	8.62*	53.00*	142.50	50.00*
Criminal history	16	2.81(1.83)	17	3.76(2.22)	20	3.75(2.12)	2.17	120.00	168.50	101.50
Childhood-Adolescence	17	2.35(1.50)	16	3.31(1.74)	19	3.11(1.70)	3.20	118.50	143.50	91.50
Education	6	1.00(0.00)	5	3.60(2.41)	9	2.56(1.42)	7.53*	9.00*	17.00	3.00*
Professional life	6	1.83(1.60)	8	2.50(1.77)	11	2.73(1.49)	1.72	20.00	39.00	19.00
Social life	5	2.00(1.41)	5	4.00(2.24)	0	0.00(0.00)	2.31	0.00	0.00	5.50
Romantic life	7	2.29(2.21)	6	3.17(1.47)	9	3.22(1.48)	2.75	17.50	26.50	12.00
Alcohol / Drug	6	2.00(1.10)	7	2.71(1.38)	12	4.83(2.44)	6.86*	12.00*	21.00	15.00
Futur perspectives	4	2.25(1.89)	3	4.33(3.06)	1	3.00	1.12	1.00	1.00	3.50
Experience of illness	4	3.50(1.91)	4	2.50(1.91)	7	5.14(1.46)	4.45	7.50	4.00	5.50
Others	8	2.00(1.07)	8	2.75(2.25)	10	4.40(1.51)	8.69*	8.00**	20.00	28.00

ASPD = Antisocial personality disorder; PPD = Psychopathic Personality Disorder; FC = Forensic Control; *<.05; **<.01

CONCLUSION

- Individuals with ASPD showed impaired autobiographical reflective functioning, particularly in emotionally and relationally salient experiences (family relationships, education, substance use, representations of others).
- Reduced autobiographical RF in the absence of elevated RFQ uncertainty may reflect difficulties transforming lived experience into reflective knowledge.
- By contrast, individuals with PPD appeared to display relatively preserved mentalizing capacities.

Integrative model of autobiographical memory → **mentalization difficulties in ASPD involve impaired integration of past experiences rather than deficits restricted to social cognition (ie : emotional dysregulation).**

- ASPD is characterised by difficulties in understanding and interpreting mental states despite a relatively intact subjective perception of mentalization abilities, potentially impairing meaning-making processes.
- Moreover, limited awareness of these reflective difficulties may hinder recognition of the evolution of one's mentalizing capacities across experiences.

→ Analysing life narratives provides a valuable approach for capturing disturbances in mentalization within personally meaningful and emotionally salient contexts.

Autobiographical integration represents an important target for assessment and mentalization-based interventions in antisocial populations.

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Événements à venir :







Merci et à très vite pour notre prochaine newsletter !